

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

DOCUMENT # **V10007**

(5)

MAY 10 1995 10:35

PHOTOLAND U.S.A., INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2. Principal Office Address 391 E FLAGLER ST MIAMI FL 33131 US		2a. Mailing Address 169 E. FLAGLER STREET SUITE 1521 MIAMI FL 33131		3. Date of Incorporation or Organization 01/29/1992	3a. Date of Last Report 05/01/1994
21. State of Incorporation FL	26. Mailing State FL	4. FFL Number 65-0285795		Approved Fee Not Applicable	
22. City MIAMI	27. Street, Apt. # 261 N.E. 1st St. 4th fl.	5. Certificate of Status Desired <input type="checkbox"/> [ ]		\$8.75 Additional Fee Required	
23. County MIAMI	28. City, State Miami, FL	6. Electoral Campaign Financing Trust Fund Contribution <input type="checkbox"/> [ ]		\$5.00 May Be Added to Fees	
24. ZIP 33132	29. ZIP 33132	30. Name Nade	8. This corporation has liability for ad valorem tax under § 199.01, Florida Statutes. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent SHOAF, NISSIM BEN 169 E. FLAGLER STREET SUITE 1521 MIAMI FL 33131				10. Name and Address of New Registered Agent				
				81. Name NISSIM BEN-SHOAFF				
				82. Street Address, if C. (Box Number, if Not Applicable) 261 N.E. 1st STREET				
				83. Apt. # 4th Floor				
				84. City MIAMI	85. State FL	86. Zip Code 33131		

11. Pursuant to the provisions of Sections 601, 602, and 603, 1909, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the principal office of both in the State of Florida. This change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am a resident of the State of Florida and accept the obligations of Sections 601, 602, and 603, Florida Statutes.

SIGNATURE: *N. Ben Shoaff*

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICE RECORDS	
NAME SHOAF, NISSIM BEN	ADDRESS 1390 CLEVELAND RD MIAMI BEACH FL	TYPE OF CHANGE Change	ADDITIONAL COMMENTS
NAME	ADDRESS	TYPE OF CHANGE	ADDITIONAL COMMENTS
NAME	ADDRESS	TYPE OF CHANGE	ADDITIONAL COMMENTS
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NAME	ADDRESS	TYPE OF CHANGE	ADDITIONAL COMMENTS

14. I hereby certify that the information required with this filing is truthful, furnished, and does not qualify for the exemption stated in Sections 601, 602, and 603, Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true, correct, and that the corporation displays the same to all offices of all banks and all other persons offering a place for the corporation of the record on public computers. I am the report as required by law for the Florida Statutes and that my name appears on Block 1, Block 10, and Block 11 of the report as required by law.

SIGNATURE: *N. Ben Shoaff*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR